AEI / FATCA self-disclosure - beneficial owner/controlling person

Policy Number _____

Legal Requirements

Liechtenstein law implementing the OECD's Common Reporting Standard (CRS), in particular the Liechtenstein Law on the International Automatic Exchange of Information in Tax Matters (AEI Law) and the Law implementing the corresponding agreement between Liechtenstein and the United States of America (FATCA Law), requires Quantum Leben AG (hereinafter "Quantum") to obtain and update information regarding tax residency from its clients. In accordance with the above provisions, you confirm the following information as the beneficial owner. Please note that you are required to self-report and a missing or incorrect self-report may result in multiple or even incorrect reporting.

If you have any questions about this form, these instructions, or how to define your tax status, please consult a qualified tax advisor or the appropriate tax authority, as Quantum, as a financial institution, is not permitted to provide advice on completing the forms. Please also review the general Quantum Privacy Statement, which can be found at the following link: https://www.quantumleben.com/de/datenschutz.html An explanation of terms can be found in the Glossary on our website at https://www.quantumleben.com.

1. Identification of the beneficial owner / controlling person within the meaning of the AEOI Law and the FATCA Law (natural person, please fill in in block capitals)

Family Name _____

First Name(s) _____

Residential address (No P.O. Box/c/o address) _____

Zip Code / City _____

Country _____

Date of birth (DD-MM-YYYY) _____

2. Identification of the policyholder (legal entity)

Please indicate the name of the policyholder (legal entity):

Name of the legal entity 1 _____

Name of the legal entity 2 _____

Name of the legal entity 3 _____

quantum leben

3. Type of beneficial owner / controlling person (natural person)

Please select the following option:

	Please check the applicable boxes with regard to the controlling person of the policyholder (legal entity) mentioned above:	Legal entity 1	Legal entity 2	Legal entity 3
a	Controlling person of a legal entity - control due to shareholding- more than 25%.	☐	☐	☐
b	Controlling person of a legal entity - control by other means	☐	☐	☐
c	Controlling person of a legal entity - supreme member of the governing body	☐	☐	☐
d	Controlling person of a trust - settlor	☐	☐	☐
e	Controlling person of a trust - trustee	☐	☐	☐
f	Controlling person of a trust - protector	☐	☐	☐
g	Controlling person of a trust - beneficiary	☐	☐	☐
h	Controlling person of a trust - other natural person	☐	☐	☐
i	Controlling person of other legal entity (not trust) - trustee/settlor equivalent	☐	☐	☐
j	Controlling person of another legal entity (not a trust) - Trustee equivalent	☐	☐	☐
k	Controlling person of another legal entity (not a trust) – Protector equivalent	☐	☐	☐
l	Controlling person of another legal entity (not a trust) - other natural person Please specify: _____	☐	☐	☐

4. Countries in which the beneficial owner / controlling person is a tax resident (natural person)

The Controlling Person hereby confirms that it is resident for tax purposes exclusively in the following countries in accordance with the respective laws and regulations applicable there (for additional tax residences, if space is insufficient - please use separate sheet):

Country of tax residence Tax identification number	Country of tax residence Tax identification number	Country of tax residence Tax identification number		
		☐A	☐B	☐C
		☐A	☐B	☐C
		☐A	☐B	☐C

Reason A: The country does not issue a TIN

Reason B: No TIN required (only possible if the country does not require a TIN for disclosure)

Reason C: other reasons (please specify):_____

quantum leben

5. Declaration of the U.S. tax status of the beneficial owner/controlling person (natural person).

As the beneficial owner/controlling person, please indicate your U.S. tax status by answering the following questions by correctly checking the boxes:

1.	Are you a U.S. citizen?	Yes / No
2.	Were you born in the U.S. (a U.S. territory)?	Yes / No
3.	Are you a U.S. resident within the meaning of U.S. tax law because	
3.1	You hold a U.S. Green Card (regardless of expiration date)?	Yes / No
3.2	Do you meet a Substantial Presence Test?	Yes / No
3.2.1	You meet the substantial presence test: Are you still a temporary or permanent resident of the U.S.?	Yes / No
3.3	Any other reason exists? (Specify the reason)_____	Yes / No
4.	Do you have a current address in the US?	Yes / No
5.	Do you have one or more phone numbers in the USA?	Yes / No
6.	Do you have a standing order or make regular payments to an account held in the U.S.?	Yes / No
7.	Do you have a valid power of attorney or authorization to sign in favor of a person?	Yes / No

I hereby certify:

- **I am not** a U.S. person for purposes of U.S. tax law
- **I am** a U.S. person within the meaning of U.S. tax law under U.S. tax considerations and am filing Form W-9

If you are a U.S. person within the meaning of U.S. tax law as a beneficial owner/controlling person, you are required to properly complete and sign Form W-9.
You can download the W-9 form yourself: www.irs.gov/pub/irs-pdf/fw9.pdf

6. Change of the circumstances

The beneficial owner/controlling person declares: As long as the contractual relationship with Quantum exists, I will inform Quantum within 30 days without being asked if my status under U.S. tax aspects or the state of my tax residency changes. If any other information on this form is no longer accurate, I will notify Quantum within 90 days of such change in circumstances, without request, and submit new forms and/or additional documents. If Quantum otherwise becomes aware of any change in circumstances that would give rise to a reporting requirement under the FATCA or AIA provisions, Quantum may base its reporting thereon unless I timely submit a self-declaration and supporting documentation to the contrary.

quantum leben

7. **Declaration and signature**

I declare that the terms and conditions governing the policyholder's relationship with Quantum, which set out how Quantum may use and pass on the information we provide, apply in full to the information I have provided here.

I acknowledge that the information contained in this form about myself and the policyholder may be reported to the Liechtenstein Tax Administration and exchanged with the tax authorities of those countries in which the policyholder is tax resident, provided that the countries concerned have concluded treaties on the automatic exchange of information in tax matters.

I declare that I have provided all the information in this declaration to the best of my knowledge and belief.

Signature: _____

Name (in block letters): _____

Date: _____

Please check if you have indicated the following documents:

☐ Form W-9 if you are a U.S. person